## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/590172

| CLAIMS AS FILED - PART I  (Column 1) (Column 2)   |  |   |  |                                |              |                                   |  | SMALL ENTITY TYPE   |                        | OR | OTHER THAN R SMALL ENTITY  |                        |
|---|--|---|--|--------------------------------|--------------|-----------------------------------|--|---------------------|------------------------|----|----------------------------|------------------------|
| U.S. NATIONAL STAGE FEES  |  |   | (55.5111)  |                                | ,,           |                                   |  | RATE                | FEE                    |    | RATE                       | FEE                    |
| BASIC FEE   |  |   | SMALL ENT. = \$ 150  |                                | LARG         | E ENT. = \$ 300                   |  | BASIC FEE           | 150                    | OR | BASIC FEE                  |                        |
| EXAMINATION FEE   |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100                  |                                |              | ner situations =<br>100 / \$ 200  |  | EXAM. FEE           | 100                    |    | EXAM. FEE                  |                        |
| SEARCH FEE  |  |   | U.S. is ISA = \$50 / \$100<br>ALL other countries =<br>\$200 / \$400 |                                |              | ther situations =<br>250 / \$ 500 |  | SEARCH FEE          | 200                    |    | SEARCH FEE                 |                        |
| FEE FOR EXTRA SPEC. PGS.  |  |   | minus 100 =  |                                |              | / 50 =                            |  | X \$ 125 =          |                        |    | X \$ 250 =                 |                        |
| TOTAL CHARGEABLE CLAIMS   |  |   | 38 minus 20 =  |                                | *            |                                   |  | X \$ 25 =           | 20                     | OR | X \$ 50 =                  |                        |
| INDI  | EPENDENT CL                                    | AIMS                                      | # m  | inus 3 =                       | * /          |                                   |  | X \$ 100 =          | 100                    | OR | X \$ 200 =                 |                        |
| MUL   | TIPLE DEPENI                                   | DENT CLAIM PRI                            | ESENT  |                                |              |                                   |  | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |  |                                |              |                                   |  | TOTAL               | 000                    | OR | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |  |   |  |                                |              |                                   |  | SMALL ENTITY        |                        | OR | OTHER THAN<br>SMALL ENTITY |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY | PRESENT<br>EXTRA                  |  | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus  | **                             |              | =                                 |  | X \$ 25 =           |                        | OR | X \$ 50 =                  |                        |
|   | Independent                                    | *   | Minus  | ***                            |              | =                                 |  | X \$ 100 =          |                        | OR | X \$ 200 =                 |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                |              |                                   |  | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
|   |  |   |  |                                |              |                                   |  | TOTAL ADDIT.<br>FEE |                        | OR | TOTAL ADDIT.<br>FEE        |                        |
|   |  | (Column 1)                                |  | (Colur                         | mn 2)        | (Column 3)                        |  |                     |                        |    |                            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA                  |  | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus  | **                             |              | =                                 |  | X \$ 25 =           |                        | OR | X \$ 50 =                  |                        |
|   | Independent                                    | *   | Minus  | ***                            |              | =                                 |  | X \$ 100 =          |                        | OR | X \$ 200 =                 |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                |              |                                   |  | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
| TOTAL ADDIT<br>FEE  |  |   |  |                                |              |                                   |  |                     |                        | OR | TOTAL ADDIT.<br>FEE        |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest-Number-Previously-Paid-For"-IN-THIS-SPACE-is-less-than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |  |                                |              |                                   |  |                     |                        |    |                            |                        |